Under the Paperwink Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.													
PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-873 Application or Docket Number													
CLAIMS AS FILED — PART I (Column 1) (Column 2)					lumn 2)		SMALL E	NTITY	OR	OTHER THAN SMALL ENTITY			
	FOR	NUMBE	R FILED	MUMBE	R EXTRA		RATE	FEE		RATE	FEE		
67 C	IC FEE SFR 1.16(pl))					l		٩	OR				
TOTAL CLAIMS D7 CFR 1.18(d)			minus 20				x \$		OR	. x \$•			
	PEOENT CLASS FR 1,16(b))	45	minus 3 * *				X \$0		OR	X 8=			
MUL	TIPLE DEPENDE	NT CLAIM PRESEN	LAIM PRESENT (37 CFR 1.18(n))			ļ	+3		O R	+3			
" If the difference in column 1 is less than zero, enter "O" in column 2.							TOTAL		OR	TOTAL			
CLAIMS AS AMENDED - PART II ELEC 5005 (Column 1) (Column 2) (Column 3) SMALL ENTITY OR OTHER THAN SMALL ENTITY													
2	1402	(Column 1)		•	· (Cotumn 3)		SMALLE	YTTTM) 	SMALL	ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total (3F CFR LM(C)	.36	Minus	36	•	Y	× 5e		94	x			
EN	Endependent (37 CPR 1.140/3)	. 4	Minus	\ \ !	. /		× 3		OR	× 1			
₹	FIRST PRESENT	ATION OF MULTIPLE	E CEPEIDE	ENT CLASM (37 CF	#R 1. (6(d))		+5=		OR	+56			
2/1/0						•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
_/	1994	(Cotumn 1)		(Column 2)	(Column 3)	_							
NT B.		CLAIMS REMAINING AFTER AMENDMENT	•	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADOI- TIONAL FEE		RATE	ADOI- TIONAL FEE		
ME	Total co-cra 1.18(c)	21	Minus	36	• /	1	x 8=		OR	x 3*			
AMENDMENT	Independent OF CFR 1.180-0	1.00	Minus	-4	•/		x s=		OR	x s=			
A	FIRST PRESENT	ATION OF MULTIPLE	OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4))			1	+5=		OR	+5=			
							TOTAL ADO'L FEE		OR	TOTAL ADD'L FEE			
	•	(Column 1)		(Column 2)	(Column 3)				•				
ENTC	4.207	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
1 2	Total cr crs 1.1800	19	Minus	36	. /	1	× 3 •		OR	x s=			
2	trappendent pp cF2 1.1400)		Minus	- 4	- \	1	x 3 =		OR	x se			
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					1	+1		OR	+			
2	36.							t	OR	TOTAL ADD'L FEE			
• Whe entry in column 1 is less than the entry in column 2, will W in column 3.													
-	" If the "Highest" The "Highest"	If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3.											

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.
This collection of information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO) to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including eithering, preparing, and extending the completed application form to the USPTO. This will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need essistence in completing the form, cell 1-800-PTO-9199 and salect option 2.